

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 807462	RECEIPT DATE:	04 / 12 / 01
IA NUMBER:	PCT/ US99 / 24554	IA FILING DATE:	10 / 20 / 99
FAMILY NAME:	BURNSIDE	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	BETH	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	10 / 21 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	550750	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: RAYMOND J LILLIE
CARELLA BYRNE BAIN GILFILLAN CECCHI STEWART & OLSTEIN
 STREET: 6 BECKER FARM ROAD

CITY: ROSELAND
 STATE/COUNTRY: NJ ZIP: 07068

EMAIL:
 APPLICATION TITLES:
 ORAL PULSED DOSE DRUG DELIVERY SYSTEM

TAB TO LAST POSITION, PUSH SEND



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COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 7386

SERIAL NUMBER 09/807,462	FILING DATE 07/19/2001 RULE	CLASS 424	GROUP ART UNIT 1617	ATTORNEY DOCKET NO. 550750
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APPLICANTS

Beth A. Burnside, Silver Spring, MD;
Xiaodi Guo, Derwood, MD;
Kimberly Fiske, Alexandria, VA;
Richard A. Couch, Bethesda, MD;
Donald J. Treacy, Arnold, MD;
Rong-Kun Chang, Hockessin, DE;
Charlotte M. McGuinness, Bethesda, MD;
Edward M. Rudnic, North Potomac, MD;

**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US99/24554 10/20/1999
WHICH IS A CIP OF 09/176,542 10/21/1998 PAT 6,322,819

**** FOREIGN APPLICATIONS *******

**** SMALL ENTITY ****

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MD	SHEETS DRAWING 7	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 5
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ADDRESS

MILLEN WHITE ZELANO & BRANIGAN, P.C.
2200 CLARENDON BLVD.
SUITE 1400
ARLINGTON, VA 22201

TITLE

Oral pulsed dose drug delivery system

FILING FEE RECEIVED 562	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input checked="" type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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** CONTINUING DATA *****

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Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

MILLEN WHITE ZELANO & BRANIGAN, P.C.
2200 CLARENDON BLVD.
SUITE 1400
ARLINGTON, VA 22201

TITLE

Oral pulsed dose drug delivery system

FILING FEE RECEIVED
562

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

☐ All Fees☐ 1.16 Fees (Filing)☐ 1.17 Fees (Processing Ex. of time)☐ 1.18 Fees (Issue)☐ Other☐ Credit



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Bib Data Sheet

CONFIRMATION NO. 7386

SERIAL NUMBER 09/807,462	FILING DATE 07/19/2001 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 550750
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APPLICANTS
Beth A. Burnside, Silver Spring, MD;
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WHICH IS A CIP OF 09/176,542 10/21/1998 PAT 6,322,819

**** FOREIGN APPLICATIONS *******
None

**** SMALL ENTITY ****

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 7	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials				

ADDRESS
27162

TITLE
Oral pulsed dose drug delivery system

FILING FEE RECEIVED 562	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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